

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) AMERICAN UNITY PAC INC			FEC IDENTIFICATION NUMBER ▼ C C00523589		
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) of Payee DMI Direct			Date M M / D D / Y Y Y Y Y Y 10 / 25 / 2012		
Mailing Address 1145 W. Collins Ave.			Amount 5525.00		
City Orange		State CA	Zip Code 92867		Transaction ID : SE.4267
Purpose of Expenditure IE-McMahon-Media Production		Category/ Type 004		Office Sought: <input type="checkbox"/> House State: CT <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: LINDA MCMAHON				Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5525.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		
Full Name (Last, First, Middle Initial) of Payee DMI Direct			Date M M / D D / Y Y Y Y Y Y 10 / 25 / 2012		
Mailing Address 1145 W. Collins Ave.			Amount 5525.00		
City Orange		State CA	Zip Code 92867		Transaction ID : SE.4268
Purpose of Expenditure IE-Roraback-Media Production		Category/ Type 004		Office Sought: <input checked="" type="checkbox"/> House State: CT <input type="checkbox"/> Senate District: 05 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: ANDREW RORABACK				Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5525.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			11050.00		
(b) SUBTOTAL of Unitemized Independent Expenditures▶					
(c) TOTAL Independent Expenditures.....▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Samuel Ashner		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 26 / 2012	